Kansas Department of Health and Environment **Bureau of Air and Radiation**

2005 Emission Inventory Class II

1000 SW Jackson, Suite 310

			Topeka, KS 6662 Phone: (785) 29 Fax: (785) 29	96-602
Source ID #:	1		(13)	
				
Source SIC:				
G 	eneral Owner	and Source Info	rmation	
Company Name:				
Mailing Address:				
City, State:			Zip:	
Physical Location Addr	ess:			
Street:				
City:			Zip:	
Contact regarding facil	ity operations:			
Name:	ity operations.			
elephone:		Fax:		
Email:				
Seasonal Operating Sc	hedule:			
hrs/day	days/wk	wks/yr		
Fully complete this que			006.	
Please mail to:				
Cathy Watso Bureau of Air	n r and Radiation			
1000 SW Jac	kson, Suite 310			
Topeka, KS				
If you have questions, co	ntact Cathy Watsor	n at (785) 296-1947.		